

CHIMERA INVESTMENT CORP

Reported by LAMBIASE MATTHEW

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/18/16 for the Period Ending 02/16/16

Address 520 MADISON AVENUE

32ND FLOOR

NEW YORK, NY, 10022

Telephone 212-626-2300

CIK 0001409493

Symbol CIM

SIC Code 6798 - Real Estate Investment Trusts

Industry Specialized REITs

Sector Financials

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
						HIM [M]	IERA 	INVES	TM	IENT	COR	X Director		;	10% Owner		
(Last) (First) (Middle)				3. 1	Date	of Earli	est Transa	ection	n (MM/D	D/YYYY	"	X _ Officer (give title below) Other (specify below) CEO, President and Director					
C/O: CHIMERA INVESTMENT CORPORATION, 520 MADISON								2/1	6/2(016							
AVENUE, 3	2ND FLO	OOR															
(Street)					4. 1	lf An	nendme	nt, Date C	rigir	nal File	d (MM/DI	YY) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
NEW YORK, NY 10022 (City) (State) (Zip)														X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(*)	3)	,		I - Non	-Der	ivati	ive Seci	ırities Ac	quir	ed, Dis	posed o	f, or	Beneficially Own	ed			
1. Title of Security (Instr. 3)			Date	e 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acqu or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securi Following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	Amount	(A) or (D)	Pric	e			(I) (Instr. 4)	(IIISII. 4)
Common Stock 2/16/2010				16			A (1)		63712 (2)	A	\$0		215112				
Common Stock 2/16/2010				16			A (1)		18970	A	\$0	(3)	234082		D		
Common Stock														33600		I	By 401(k) Plan
	Tab	le II - Der	ivative	Securi	ties l	Bene	ficially	Owned (e.g.	, puts, o	calls, wa	arrar	nts, options, conve	rtible sec	curities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	Executio	A. Deemed Execution Date, if any		Acqui Dispos				6. Date Exercisable and Expiration Date			le and Amount of ities Underlying ative Security 3 and 4)	rlying Derivative	9. Number of derivative Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			(Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares			Direct (D) or Indirect s) (I) (Instr. 4)	

Explanation of Responses:

- (1) Represents shares of Chimera common stock underlying restricted stock units ("RSUs"). The RSUs are scheduled to vest one-third per year on the first, second and third anniversaries of the grant date and shall be settled 100% in shares of Chimera common stock. The reporting person does not intend to report the vesting of the RSUs nor the delivery of the shares of common stock.
- (2) The reporting person elected to defer share settlement until separation of service.
- (3) Each RSU has the economic equivalent of one share of Chimera common stock.

Reporting Owners

Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
LAMBIASE MATTHEW C/O: CHIMERA INVESTMENT CORPORATION 520 MADISON AVENUE, 32ND FLOOR NEW YORK, NY 10022	X		CEO, President and Director	•					

Signatures

/s/Matthew Lambiase 2/17/2016

**Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.